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鼻内镜下行鼻中隔矫正术对鼻腔鼻窦微创治疗的临床效果及意义

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摘要 目的:探讨鼻内镜下鼻中隔矫正术的效果及其对鼻腔鼻窦微创手术的临床意义。**方法:**2010年3月至2013年3月对102例伴有鼻中隔偏曲的鼻腔鼻窦疾病患者,随机分为研究组(n=78)和对照组(n=24),分别施行了鼻内镜下鼻中隔矫正术和传统手术。**结果:**对照组患者治愈率为64.29%、总有效率78.57%,治疗组分别为83.78%和95.95%;两组临床疗效比较,差异具有统计学意义($P < 0.05$)。研究组患者的术中的出血量和手术时间均明显少于对照组,差异具有统计学意义($P < 0.05$)。术后研究组患者的出血量和并发症总数均明显少于对照组,差异具有统计学意义($P < 0.05$)。研究组患者的平均住院时间明显短于对照组,差异显著具有统计学($P < 0.05$)。**结论:**鼻内镜下鼻中隔矫正术较传统鼻中隔矫正术安全,效果可靠,手术并发症少,患者恢复快,更有利于同期鼻腔鼻窦微创手术的实施,提高了其手术治疗效果。

关键词:鼻内镜手术;鼻中隔矫正;临床效果

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Clinical Effect and Significance of Intranasal Endoscopic on the Treatment of Nasal Septum for the Sinonasal Minimally Invasive Surgery

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ABSTRACT Objective: To investigate the clinical effects and significance of endoscopic nasal surgery on the treatment of minimally invasive surgery. **Methods:** 102 patients with deviated nasal septum disease who were treated in our hospital from March 2010 to 2013 were selected and randomly divided into the study group(n=78) and the control group (n=24). Then the operation time, the blood loss, the rate of total efficiency and the incidence of complications were observed and compared between two groups. **Results:** The cure rate in control group was 64.29% and the total efficiency rate was 78.57%; the cure rate in the study group was 83.78% and the total efficiency rate was 95.95%; There were statistically significant differences between two groups ($P < 0.05$). The blood loss and time for operation in study group were lower than those of the control group with statistically significant differences ($P < 0.05$). The incidence of complications in the study group was lower than that of the control group with statistically significant difference($P < 0.05$). The hospitalization of the patients in the study group was shorter than that of the control group with statistically significant difference ($P < 0.05$). **Conclusion:** In comparison with traditional nasal septum orthotics, endoscopic nasal septum orthotics in treatment of nasal septum deviation has many advantages, its cure is safer and more definite, with fewer surgical risks, hence patients recovery soon. it has the virtue of little trauma, high safety, fast recovery and little complications. It is more conducive to the sinonasal minimally invasive surgery and further improve the surgical outcomes of the nasal septum for the sinonasal minimally invasive surgery.

Key words: Nasal endoscope; Nasal septum correction; Clinical effects

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前言

慢性鼻炎和鼻窦炎的发病率逐年升高,给患者的健康带来严重的威胁^[1,2]。研究发现,鼻部结构的异常主要是鼻中隔的偏曲,其与鼻部疾病存在密切相关性^[3,4]。因此,对于鼻中隔的矫正将对于鼻部疾病的治疗具有积极的意义,传统的鼻部开放式手术给患者的面容带来严重损害并易出现并发症,此外对于后续的鼻腔鼻窦的微创治疗带来较大困难^[5,6]。随着鼻内镜技术的不断发展和成熟,逐渐在临床中得到应用,对于鼻部疾病的治疗

取得一定疗效。本研究对我院近三年通过鼻内镜和鼻部传统手术进行鼻中隔矫正治疗中的效果,以及鼻腔鼻窦微创治疗的临床资料进行分析,现报道如下。

1 资料与方法

1.1 临床资料

选取我院2010年3月-2013年3月收治的伴有鼻中隔偏曲的鼻腔鼻窦疾病患者102例,男56例,女46例,年龄平均 (49.23 ± 6.28) 岁,病程平均为 (4.71 ± 0.92) 年,合并慢性肥大性鼻炎34例,慢性鼻窦炎31例,鼻息肉37。将患者随机分为研究组和对照组,分别为74例和28例。两组一般资料比较无显著性差异,两组实验数据具有可比性($P > 0.05$)。该研究经医院

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1.2 方法

研究组患者在局麻加强化下,采用奥林巴斯公司生产的0°和30°鼻内镜成像系统,在直视状态下进行鼻部相关手术,首先进行鼻中隔的矫正手术,依据不同患者偏曲部位、形状和程度进行软骨和骨质的切除,然后再依据患者合并症的情况,对鼻甲、鼻息肉进行切除术,对鼻窦采用微创治疗。术后患者对症支持治疗,双侧填塞止血,术后抗生素预防感染,定期鼻内镜清除鼻腔内分泌物。对照组患者采用常规的鼻中隔粘膜下切除术,病人取坐位,使用1%丁卡因加适量肾上腺素,双鼻腔表面和局部麻醉,采用Killian法,选择常规左侧中隔鼻阈后切口,切除大部分鼻中隔软骨和骨。

1.3 疗效评价

评价标准:(1)治愈:无临床症状,鼻内镜检查鼻窦开口良好,鼻窦粘膜恢复,鼻腔无脓性分泌物;(2)显效:临床症状得到明显改善,鼻内镜检查鼻窦腔粘膜少许水肿和肥厚,少量脓性分泌物;(3)无效:临床症状无变化,鼻内镜检查鼻窦腔粘膜粘连,窦口狭窄或者完全闭锁,形成息肉,窦腔存在大量脓性分泌物。记录两组患者术后并发症如出现鼻部粘连、鼻部穿孔、鼻中

隔血肿、鼻脓肿和感染等并发症的发生情况以及住院时间等。

对于疗效测定采用,如下公式:

$$\text{总有效率}(\%) = \frac{\text{治愈例数} + \text{显效例数}}{\text{患者总数}} \times 100\%$$

1.4 统计学分析

采用SPSS 17.0软件包进行统计学处理。正态分布计量资料的两组间比较应用独立样本t检验,计数资料的比较应用 χ^2 检验或Fisher精确概率法。 $P < 0.05$ 定义为有统计学意义。

2 结果

2.1 疗效评价

对两组患者手术治疗后进行疗效评价,研究组的治愈率显著高于对照组, $\chi^2 = 4.565$, $P = 0.033$,差异具有统计学意义。研究组的总有效率显著高于对照组, $\chi^2 = 7.622$, $P = 0.006$,差异具有统计学意义。见表1。

2.2 两组患者术中状况分析

研究组患者的术中的出血量和手术时间均明显少于对照组,差异具有统计学意义($P < 0.05$)。见表2。

表1 两组临床疗效比较分析

Table 1 Analysis of the clinical efficacy

Groups	cases	Cured(%)	Effect(%)	Invalid(%)	Total efficiency(%)
Control group	28	18(64.29)	4(14.29)	6(21.43)	22(78.57)
Research group	74	62(83.78)	9(11.16)	3(4.05)	71(95.95)

表2 术中相关指标观察分析

Table 2 The observation and analysis of intraoperative relevant indicators in two groups

	Research group(n=74)	Control group(n=28)	t	P
Operation time(min)	45.62± 10.17	65.43± 13.41	8.016	0.000
Blood loss(ml)	14.22± 5.31	43.58± 14.74	14.865	0.000

2.3 两组患者术后恢复状况分析

术后研究组患者的出血量和并发症总数均明显少于对照

组,差异具有统计学意义($P < 0.05$)。研究组患者的平均住院时间明显短于对照组,差异显著具有统计学($P < 0.05$)。见表3。

表3 术后相关指标观察分析

Table 3 The observation and analysis of postoperative relevant indicators in two groups

	Research group(n=74)	Control group(n=28)	t/ χ^2	P
Mean hospitalization time(d)	6.41± 1.52	14.20± 2.86	17.799	0.0000
Total number of complications	2	5	7.299	0.007
Postoperative bleeding(ml)	5.36± 2.17	24.28± 7.94	18.853	0.000

3 讨论

目前,慢性鼻炎、鼻窦炎和鼻息肉等鼻部疾病发病率逐年升高,研究显示鼻中隔偏曲为鼻部疾病的重要病因之一^[79]。鼻中隔的偏曲常导致鼻部气流异常,易诱发鼻部相关炎症的发生^[10,11]。鼻中隔的偏曲常由于先天或者后天因素导致鼻中隔的偏离,导致鼻腔狭窄,增加了手术的难度,给患者的治疗带来一

定的困难^[12]。为此亟待一种新的治疗方式对此类疾病进行有效的治疗。

随着鼻内镜技术临床的广泛应用,在鼻中隔矫正的治疗和鼻腔鼻窦微创手术中取得良好的疗效^[13]。本研究结果显示,研究组的治愈率和总有效率均显著高于对照组,可见鼻内镜在鼻中隔矫正术和鼻腔鼻窦微创手术中临床疗效明显优于传统的手术方式治疗。主要是鼻内镜亮度较高,视野较传统额镜更为

清晰开阔,无死角,可以更全面的对手术部位进行彻底的清除治疗^[14-16]。在鼻内镜摄像系统直视下操作,手术处理更为准确适度、效果可靠,减少了手术的时间和术中的出血,同时,术中根据患者不同的鼻中隔偏曲类型和程度采取相应的有效手术方法,从而降低术中正常黏膜的损伤和组织的切除,降低了鼻部出血、鼻穿孔和鼻部其他相关并发症的发生^[17,18],本研究结果显示研究组的术后并发症和出血量均明显少于对照组。

鼻内镜下鼻中隔的矫正术良好实施为后续鼻窦手术的开展提供了良好的操作环境,更有利于鼻窦脓液的引流和鼻腔的清理,从而更好的减少了鼻部黏膜的炎症和粘连的发生,提高了鼻腔鼻窦的微创手术的效果,减少患者再次手术,降低患者的痛苦,患者的住院时间明显缩短,医疗费用明显降低^[19,20]。本研究显示鼻内镜治疗组患者术后住院时间明显缩短。此外,鼻内镜摄像系统直视手术下给鼻部临床教学带来了很大的便利,提高了手术的直观性更利于学习者的理解,提高了临床教学质量^[21]。

总之,鼻内镜下进行鼻中隔矫正术时视野清晰、深部操作直观易行,软骨和骨组织切除少,临床疗效较好,操作精确、微创、出血量少,并发症少等优点,增加了手术的安全性,便于鼻腔鼻窦的微创治疗的开展,利于恢复鼻腔的正常生理功能,维持鼻中隔稳固性起到很大的作用值得在临床中推广应用。

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